

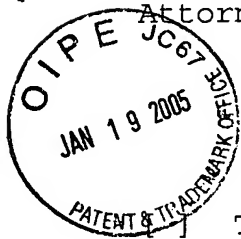
## FEE TRANSMITTAL

01-21-05

fw/\$

Application Number 10/608,101  
Filing Date June 27, 2003  
Inventor(s) John S. Ng et al.  
Examiner Name Taofiq A. Solola  
Attorney Docket Number PHA 4199.1 (3090/7/US)

Art Unit 1626  
Confirmation No. 8072



[ ] Applicant claims small entity status.

## METHOD OF PAYMENT

The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

[X] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

## FEE CALCULATION

1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. [ ] EXCESS CLAIM FEES

Total Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_  
Indep Claims \_\_\_\_ - \_\_\_\_ (HP) = \_\_\_\_ x Fee \_\_\_\_ = \$ \_\_\_\_  
Multiple Dependent Claims Fee \$ \_\_\_\_  
(HP = highest number of claims paid for)

Subtotal (2) \$ \_\_\_\_\_

3. [ ] APPLICATION SIZE FEE

Total Pages \_\_\_\_ - 100 = \_\_\_\_ ÷ 50 = \_\_\_\_ x \$250 = \$ \_\_\_\_  
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ \_\_\_\_\_

4. [X] OTHER FEE(S)

[X] 2nd month extension of time  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[ ] Notice of Appeal  
[ ] Filing a brief in support of appeal  
[ ] Request for oral hearing  
[ ] Other: \_\_\_\_\_

Subtotal (4) \$ 450.00

TOTAL AMOUNT OF PAYMENT \$450.00

Janet S. Hendrickson, Ph.D., Reg. No. 55,258  
Telephone: 314-231-5400

Date

1/19/05

JSH/dep

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